


If you have heart failure, you are most likely taking several medications. Being on so many medications can feel overwhelming.

Here are some tips that might help.

- 1. Learn about your medications.** Be sure you know why you are taking each medication, how each one works and possible side effects. Research shows that when people understand why they need each medicine, they are more likely to take them.
- 2. Keep an up-to-date list of all your medications, including those you can get over-the-counter like pain relievers, aspirin or supplements.** Share and review this complete list with your health care providers. Certain medications can make heart failure worse. For example, non-steroidal anti-inflammatory drugs (ibuprofen, Aleve, etc.), certain calcium channel blockers (Amlodipine/Norvasc), steroids (Prednisone), and some medicines for diabetes and for neuropathy (Pioglitazone/Actos, Rosiglitazone/Avandia).
- 3. Always take your medications exactly as prescribed. That's how they work!**
 - Follow the instructions and don't be shy to ask your pharmacist if you have questions.
 - Do not skip a dose, stop or make changes to a medication without talking with your care team.
- 4. Ask what to do if you miss a dose.** Taking so many medications can make missing a dose more likely. In general, you can take a missed dose as soon as you remember; if you don't remember until near the end when you would take the next dose, it's often recommended to skip the missed dose.
- 5. Set a reminder on your phone or consider using a pill box to pre-sort medications.** Some pill boxes allow you to sort medications based on the time of day you should take them. This helps take some of the guess work out of how and when to take your medicines.



Forgetting to or not taking medications is among the most common reasons people with heart failure end up in the hospital. Talk with your care team if you have any difficulties.

6. Refill your prescriptions before you run out. This is especially important if you have upcoming travel. Try to use one pharmacy and ask if you can automate refills and get all of your medications on the same schedule to make reordering easy.

7. Share any concerns you have with your health care team.

For example:

- How and when you should take your medications
- Side effects
- Difficulty remembering to take them
- Cost
- Feeling overwhelmed by taking so many medicines

A few other things to keep in mind:

- Your medications will likely be adjusted over time, sometimes even when you are feeling well.
- You will most likely need to take many of these medications for life; unlike antibiotics for certain infections or medications for a headache.
- Speak up if you are having trouble with your medications, whether it's paying for them, taking them or because of side effects. Don't wait until your next appointment. Your provider can help you select alternatives that may be a better fit so you will not miss out on the benefits of treatment before your next office visit.
- You may need bloodwork to check and see how your body, especially your kidneys, responds.

Common medications for Heart Failure

Below is a list of the medications you might be taking, and very simply how each one works. It's important to remember that each medication works differently, often in complementary ways, to help relieve your symptoms and keep your heart from working so hard to pump blood to your body.

Diuretic (water pill)

Diuretics help get rid of excess water (fluid buildup) in your body. This makes it easier for your heart to pump, but they will make you pee a lot. There are several types.

Aldosterone receptor antagonist

Another type of diuretic that helps the body remove water and sodium through the urine, but prevents you from losing potassium.

Angiotensin-converting enzyme inhibitors (ACE inhibitors)

— OR —

Angiotensin II receptor blockers (ARBs)

ACE inhibitors and ARBs widen and relax blood vessels and make it easier for the heart to pump. They also lower blood pressure.

— OR —

Angiotensin II receptor blocker neprilysin inhibitor (ARNI)

NOTE: ACE-inhibitors, ARBs and ARNIs each work similarly, but ARNIs are stronger due to an additional ingredient. It should only be started 36 hours after stopping an ACE inhibitor. To help decide if an ARNI is right for you, ACC has created a tool to help.

[CardioSmart.org/HFDecisionAids](https://www.cardiosmart.org/HFDecisionAids)

Beta blocker

Beta blockers slow down heart rate, lower blood pressure and may reverse some of the heart damage.

Sodium-glucose cotransporter-2 (SGLT2) inhibitors

Helps to control blood sugar, but it also prevents hospitalization and death. It also seems to help with weight loss, blood pressure and fluid levels, which means less stress on the heart and kidneys.

Sinoatrial node inhibitor

This medicine slows heart rate and reduces the amount of oxygen the heart needs and how much the heart needs to work to pump blood. It is used with beta blockers if they do not lower heart rate enough.

Hydralazine and isosorbide dinitrate

Widen or relax blood vessels to make it easier for the heart to pump.

Digoxin

Slows heart rate and helps your heart pump more blood.

To track your heart failure medicines, use our chart.

What I most want to ask about or focus on when it comes to my medications:
